

FACSIMILE COVER SHEET

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Date: 2-28-05

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| | | |
|------------|------------------------------|------------|
| From: | Lee Van Pelt | |
| Re: | Application Serial No.: | 09/918,681 |
| Our File: | INT1P905C1 | |
| No. Pages: | (including this cover sheet) | ELEVEN |

| | |
|----------|----------------|
| To: | USPTO |
| FAX NO.: | 1-703-872-9306 |

DOCUMENTS:

| | |
|---------|----------------------------|
| 2 pages | TRANSMITTAL OF AMENDMENT A |
| 8 pages | AMENDMENT A |

CERTIFICATE OF FACSIMILE

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2-28-05

Signed: Vicki Lorist
 Vicki Lorist

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|------------------|--|-------------|--------------------|
| Inventor: | RODERICK et al. | Examiner: | Shawki Saif Ismail |
| Application No.: | 09/918,681 | Art Unit: | 2155 |
| Filed: | July 27, 2001 | Docket No.: | INT1P905C1 |
| Title: | INTERFACE INCLUDING NON-VISUAL DISPLAY FOR USE IN BROWSING AN INDEXED COLLECTION OF ELECTRONIC CONTENT | | |

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Dated: 2.28.05

Signed: Vicki Lorist
Vicki Lorist

TRANSMITTAL OF AMENDMENT A

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Amendment A in response to Office Action mailed November 30, 2004 in the above-identified application.

The fee has been calculated as shown below.

| CLAIMS | After Amd. | HP* | Extra | Small Entity | | Large Entity | |
|-------------------------------|------------|-----|-------|--------------|-----|-----------------|-----|
| | | | | Rate | Fee | Rate | Fee |
| Total | 18 | 20 | -0- | x \$25 = \$ | | OR x \$50 = \$ | |
| Independent | 3 | 3 | -0- | x \$100 = \$ | | OR x \$200 = \$ | |
| Multiple Dependent Claims | | | | x \$180 = \$ | | OR x \$360 = \$ | |
| *HP = Highest previously paid | | | | TOTAL FEE \$ | | OR TOTAL FEE \$ | -0- |

Applicant(s) hereby petition for following extension of time in which to respond to the outstanding Office Action.

| | SMALL ENTITY | | LARGE ENTITY | |
|---|---------------|-----------|------------------|-----------|
| | Rate | Add'l Fee | Rate | Add'l Fee |
| <input type="checkbox"/> Extension for Response within FIRST month | x \$60 = \$ | | OR x \$120 = \$ | |
| <input type="checkbox"/> Extension for Response within SECOND month | x \$225 = \$ | | OR x \$450 = \$ | |
| <input type="checkbox"/> Extension for Response within THIRD month | x \$510 = \$ | | OR x \$1020 = \$ | |
| <input type="checkbox"/> Extension for Response within FOURTH month | x \$795 = \$ | | OR x \$1590 = \$ | |
| <input type="checkbox"/> Extension for Response within FIFTH month | x \$1080 = \$ | | OR x \$2160 = \$ | |

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685. (INT1P905C1).

Enclosed is our Check No. _____ in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.

Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.

Enclosed are _____ sheets replacement drawings.

Please charge Deposit Account No. 50-0685 (INT1P905C1) in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.

If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (INT1P905C1).

OTHER:

Respectfully submitted,



William J. James
Registration No. 40,661

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